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HAVERFORDWEST BOROUGH COUNCIL



# REPORT

of the

## Medical Officer of Health

for the Year

### 1952



**Haverfordwest Borough Council**

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**REPORT  
of the  
MEDICAL OFFICER OF HEALTH  
FOR THE YEAR 1952**

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District Health Department  
County Offices,  
Haverfordwest.  
September, 1953.

**To the Chairman and Members of  
the Sanitary Committee.**

Mr. CHAIRMAN, MADAM and GENTLEMEN,

I have pleasure in presenting my Annual Report upon matters relating to the Public Health in the Borough, for the year 1952.

There was a slight increase in both total population, and in the natural increase in population.

The total number of live births was 119, which gave a General Birth-Rate of 16.3 per 1000 of population. This rate is two points higher than the Rate for 1951, and may also be compared with the average Rate of 15.3 throughout England and Wales. There was a steady fall in the Birth-Rate from 24.3 in 1947 to 16.1 in 1951. The present rate, therefore, shows the first increase over the past six years. The intensive housing programme has undoubtedly had a beneficial effect on the General Birth-Rate.

There was a large increase in the number of Still-Births over the preceding year, which resulted in a corresponding high Still-Birth Rate. There was a small increase in the number of Illegitimate Births.

It is satisfactory to note that the gradual decrease in the General Death-Rate over the past six years has continued. The Rate of 11.3 for 1952 is six points lower than the Rate for 1951, and compares favourably with the average Rate of 11.3 for the whole of England and Wales. This is further enhanced by the fact that 55% of all deaths were in persons of 70 years of age or more.

It has long been realised that the first year is a critical period in a person's life. Consequently special attention is paid to mortality statistics in Infants (i.e. children under one year of age). There has been a tremendous decrease in the number of Infant Deaths over the past fifty years, i.e. Infantile Mortality. The Infantile Mortality Rate has fallen in the Borough from 51.2 in 1947 to 25.2 in 1951, i.e. almost halved. This reflects an improved standard of living conditions, as well as improved medical care. It is now realised that of the first year of life, the first month is the most critical period. This is demonstrated by the fact that of the three Infant Deaths in the Borough during 1951, two of these occurred during the first four weeks of life.

Once again there has been a small decrease in the number of deaths due to Cancer. Whether this is only temporary, or whether the peak of this disease has been reached cannot yet be said. Improvement in mortality statistics have been due to improved methods of treatment rather than any preventative measures. However, certain precautions are taken in Industry to protect workers from carcinogenic substances. There is also a certain amount of educational literature being produced. The warning of the danger of drinking hot fluids, as a predisposing factor in Cancer of the stomach, is an example of this.

The number of Violent deaths during the year was the lowest since 1948.

There was a greatly decreased incidence of Infectious Disease in

the Borough over the preceding year. The decrease was specially noticeable in regard to Measles and Whooping Cough. It must be stated that the facilities for disinfection are unsatisfactory.

The number of fresh cases of Pulmonary Tuberculosis decreased from 8 in 1951 to 2 in 1952. Whilst it is unlikely that this low figure will be maintained, it gives considerable satisfaction for the year under review.

There were no deaths from Pulmonary Tuberculosis during 1951. This is a matter of great satisfaction, and is probably the first year without such a death in the history of the Borough.

There was a small increase in the number of Children Immunised against Diphtheria during the year. This is a welcome sign that the interest of parents is being revived. For the fifth successive year there has not been a case of Diphtheria in the Borough.

There was a considerable decrease in the number of vaccinations against Smallpox during the year. In view of the fact that Smallpox continues to be imported into Great Britain, it is a wise insurance, on the part of parents to have their children vaccinated.

The standard of cleanliness of milk supplies further increased during the year, there being 86.3% satisfactory samples. The total number of samples taken, however, was rather low and requires to be considerably increased. The numerous Departments and officials involved in the control of milk leads to some confusion and renders difficult effective co-operation.

The purity of the water supply is controlled by routine bacteriological sampling, and continues to be satisfactory. Quantity is also reasonably satisfactory, apart from storage facilities. There is only approximately a day's supply storage, which cannot be considered adequate. The average daily consumption of water of 46 gallons per head of population appears to be a rather high figure.

Food Control, and particularly the Inspection of Meat, continues to absorb a large part of the time of the Sanitary Department staff. There has been a further rise in the total number of animals slaughtered during 1952. Improvements have been effected at the Slaughter House, and conditions there are reasonably satisfactory.

1952 was a peak year for the provision of new houses, 106 houses have been completed. There is a need for a continued balanced Housing programme.

In regard to the disposal of refuse, I strongly advocate the Council to acquire a new tipping-ground, if this is to be the method of future disposal. There is no doubt that incineration is the most effective means of destroying refuse, and I had hoped that several of the District Councils would have jointly sponsored a central incinerator. This could be combined with a disinfection and disinfestation centre.

The sewage disposal in the Borough continues to detract from the amenities of the town, and hinders further development. Due to the fact that the river is tidal the danger to public health is minimised. There is still, however, a potential danger.

In conclusion, I wish to thank all members and officers of the Council for their continued courtesy and co-operation during the year.

I remain,

Your obedient servant.

W. J. Y. SPEEDY.

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# Part I

## VITAL STATISTICS AND EPIDEMIOLOGY

### SUMMARY OF VITAL STATISTICS

	1. Estimated Mid-year Population	7,284	(7,255)
	2. Natural Increase in Population	+36	( +31)
(a)	3. General Birth Rate	16.3	(15.3 )
	4. Still-Birth Rate	62.9	(22.6 )
	5. Illegitimate Birth Rate	0.55	( 0.41)
(b)	6. Infantile Mortality Rate	25.2	(27.6 )
	7. Cancer Deaths-Rate	1.9	( 3.9 )
	8. Tuberculosis Death-Rate	0.0	( 0.21)
	9. General Death-Rate	11.3	(11.3 )
	10. Notification Rate of Pulmonary Tuberculosis	0.27	( 1.1 )
	11. Notification Rate of Non-Pulmonary Tuberculosis	0.27	( 0.27)
	12. Notification Rate of Measles	0.13	(34.8 )
	13. Notification Rate of Whooping Cough	1.51	( 3.8 )
	14. Notification Rate of Pneumonia	0.68	(— —)
	15. Notification Rate of Scarlet Fever	0.41	( 0.69)
	16. Notification Rate of Other Infectious Diseases	Nil	
(a)	Per 1000 Total Births		
(b)	Per 1000 Live Births.		

All other Rates are per 1000 of population.

Figures in brackets are Rates for the whole of England and Wales.



## BIRTHS AND BIRTH-RATES

### Classification of Births.

	Live Births			Still Births			Total
	M	F	Total	M	F	Total	
Legitimate	59	57	116	5	2	7	123
Illegitimate	2	1	3	1	0	1	4
	61	58	119	6	2	8	127
Total Births for 1952			= 127				
Live Births for 1952			= 119				
Still Births for 1952			= 8				
Illegitimate Births for 1952			= 4				

### General Birth Rate.

(i.e. No. of Live Births per 1000 population)

Birth-Rate for the Borough for 1952 = 16.3 (16.1)

Birth-Rate for England and Wales for 1952 = 15.3

It will be seen therefore that the General Birth-Rate for the Borough is somewhat higher than the Rate for the whole of England and Wales. The Birth-Rate in the Borough has fallen gradually from 19.6 in 1948 to 16.1 in 1951, but appears now to have reached a more or less static level.

### Still Birth-Rate.

(i.e. number of Still Births per 1000 total births)

Still Birth-Rate for the Borough for 1952 = 62.9 (8.3)

Still-Birth Rate for England and Wales for 1952 = 22.6

It will be seen therefore that the Still-Birth Rate in the Borough was exceptionally high as compared with the average Rate in the whole of England and Wales.

### Illegitimate Birth-Rate.

(i.e. number of Illegitimate Births per 1000 population)

Illegitimate Birth-Rate for the Borough for 1952 = 0.55

Illegitimate Birth-Rate for England and Wales for 1952 =

## DEATHS AND DEATH RATES

### General Death-Rate.

Total number of Deaths registered in 1952 = 83

Death-Rate for Borough in 1952 = 11.3 per 1000 pop.

Death-Rate for England and Wales for 1952 = 11.3 per 1000 pop.

The Death-Rate for the Borough compares favourably therefore with the Rate for the whole of England and Wales.

There has been a continued gradual decline in the Death-Rate in the Borough over the past five years, as shown in the following table:—

Year	Death Rate
1948	12.8
1949	12.8
1950	11.9
1951	11.9
1952	11.3

## Classification of Deaths.

The following Table shows the Main causes of Deaths :—

	M	F	Total
Diseases of the Heart and Circulatory System	= 13	15	28
Diseases of Brain and Nervous System	= 5	9	14
Cancer (all forms)	= 11	3	14
Infectious Diseases (excluding Tuberculosis and Pneumonia)	= 2	4	6
Diseases of the Urinary System	= 1	3	4
Diabetes	= 0	3	3
Diseases of the Digestive System	= 1	1	2
Violent Deaths	= 2	0	2
Diseases of the Respiratory System (excluding Infection Disease)	= 0	1	1
Congenital Malformations	= 1	0	1
Unclassified and Ill-defined	= 2	6	8
	38	45	83

55.1% of all these deaths were in persons of 70 years of age or more.

## Tuberculosis Mortality.

Tuberculosis is discussed in a later section of the Report. It will be noted, however, that no deaths from Tuberculosis was registered during 1952.

## Infant Mortality.

There were three deaths of Infants, i.e. children under one year of age, during the year, as shown below :—

	M	F	Total
Legitimate	1	1	2
Illegitimate	0	1	1
	1	2	3

Infantile Morality Rate for Borough for 1952 = 25.2 /1000 live births

Infantile Mortality Rate for England and Wales 1952 = 27.6 /1000 live births

It will be seen therefore that the Infant Mortality Rate in the Borough is a great deal lower than the Rate for the whole of England and Wales. This is a matter for some satisfaction and reflects upon the efficiency of the medical and nursing services in the Borough, coupled with the provision of good living conditions.

Two of the above three Infant Deaths took place during the first four weeks of life, i.e. the neo-natal period, and demonstrates the importance of this period in a child's life.

## Cancer Mortality.

The following deaths occurred due to cancer during the year :

Males	= 11
Females	= 3
	—
	14

Cancer mortality Rate for Borough for 1952 = 1.9 /1000 pop.

Cancer mortality Rate for England and Wales = 3.9 /1000 pop.

It will be seen therefore that the Cancer Morality in the Borough is considerably lower than the average mortality throughout England and Wales.

The following Table shows the number of Cancer Deaths and Cancer Morality Rate in the Borough over the past five years :—

Year	No. of Deaths	Rate /1000 Pop.
1952	14	1.9
1951	16	2.2
1950	17	2.3
1949	13	1.8
1948	15	2.0

Over the past three years, therefore, there has been a continued small decrease in Cancer Mortality.

The Age Groups in which the Cancer Deaths occurred were as follows :—

0 — 30 years	= nil
30 — 50 years	= 1
50 — 70 years	= 4
70+— years	= 9

### Violent Deaths.

The following is a summary of the Violent Deaths during the year :—

	M	F	Total
Road (Vehicle) Accident	1	—	1
Home Accidents	0	1	1
	1	1	2

The following is a summary of Annual Violent Deaths over the past 5 years :—

Year	No. of Deaths
1952	2
1951	4
1950	3
1949	3
1948	2

## INFECTIOUS DISEASES

### Incidence of Infectious Diseases.

The following Infectious Diseases were notified during the year :—

	M	F	Total	
Whooping Cough	8	3	11	(28)
Pneumonia	3	2	5	
Scarlet Fever	—	3	3	(5)
Puerperal Pyrexia	—	1	1	
Measles	—	1	1	(252)

There was a greatly decreased incidence of Infectious Disease over the preceding year, especially regarding Measles and Whooping

Cough. The absence of Poliomyelitis, Dysentry and Para-typhoid fever from the list will be noted.

For the fifth successive year not a single case of Diphtheria or Infantile Paralysis has been notified in the Borough.

### Notification Rates for Infectious Diseases.

Disease	Not. Rate England and Wales	Not. Rate Borough
Whooping Cough	1.61	1.51
Pneumonia	0.72	0.68
Scarlet Fever	1.53	0.41
Measles	8.86	0.13
Enteric Fever	0.02	Nil
Diphtheria	0.01	Nil
Erysipelas	0.14	Nil
Smallpox	Nil	Nil
Poliomyelitis	0.06	Nil
Food poisoning	0.13	Nil

(N.B. The above Rates are per 1000 of population).

### Mortality from Infectious Diseases

The following deaths occurred due to Infectious Disease during 1952 :—

	M	F	Total
Pneumonia	2	3	5
Other Infectious Disease	0	1	1
	2	4	6

The following table shows the Annual percentage of deaths due to Infectious Diseases over the past five years :—

Year	% of Total Deaths
1948	8.6
1949	3.1
1950	5.7
1951	2.3
1952	7.2

## TUBERCULOSIS

**Pulmonary Tuberculosis.**  
tory system).

(i.e. Tuberculosis primarily affecting the Lungs and Respira-

### Incidence of Pulmonary Tuberculosis.

The following fresh cases of Pulmonary Tuberculosis were notified during the year :—

Sex	Age Groups				Total
	1—15	15—30	30—50	50+	
Males	—	—	1	1	2
Females	—	—	—	—	—
Totals	—	—	1	1	2

Notification (Incidence) Rate of Pulmonary Tuberculosis  
for Borough for 1952 = 0.27

Notification Rate of Pulmonary Tuberculosis for England  
and Wales for 1952 = 0.21

The following Table shows the Total number of cases notified  
over the past six years :—

Year	No. of cases
1947	7
1948	10
1949	7
1950	1
1951	8
1952	2

It will be seen that there was a greatly decreased incidence  
of Pulmonary Tuberculosis in 1952, as compared with the preceding  
year.

### Mortality from Pulmonary Tuberculosis.

There were no deaths from Pulmonary Tuberculosis during  
1952.

The following Table shows the annual Deaths from Pulmon-  
ary Tuberculosis since 1947 :—

Year	No. of Deaths
1947	3
1948	3
1949	3
1950	2
1951	3
1952	0

### Non-Pulmonary Tuberculosis.

(i.e. Tuberculosis primarily affecting parts of the body other  
than the Lungs).

### Incidence of Non-Pulmonary Tuberculosis.

The following Table shows the number of cases notified for  
1952 and earlier years :—

Sex	1—15	15—30	30—50	50+	...	1952	1951	1950	1949	1948
Males	—	—	—	—	...	—	2	2	1	1
Females	—	—	2	—	...	2	—	—	—	—
Total	—	—	2	—	...	2	2	2	1	1

The incidence of Non-Pulmonary Tuberculosis has remained  
static over the past three years.

### Mortality from Non-Pulmonary Tuberculosis.

There were no deaths from Non-Pulmonary Tuberculosis  
during the year.

The following Table shows the deaths from Non-Pulmonary Tuberculosis since 1947 :—

1947	—	1	.....	1950	—	2
1948	—	1	.....	1951	—	1
1949	—		.....	1952	—	0

## IMMUNISATION AND VACCINATION

### Immunisation Against Diphtheria.

The following is a summary of Immunisation carried out during the year :—

#### Sessional :

##### Primary Immunisations—

0	—	5 years	=	13	
5+	—	years	=	2	15
				—	

##### Reinforcement—

5	—	10 years	=	2	
10+	—	years	=	0	2
				—	

#### Private :

##### Primary Immunisations—

0	—	5 years	=	43	
5+	—	years	=	7	50
				—	

##### Reinforcement—

5	—	10 years	=	16	
10+	—	years	=	0	16
				—	

Total 83 (74)

The following Table shows the number of cases of Diphtheria and the number of deaths in Wales since 1944 :—

Year	No. of cases	No of Deaths
1944	2,213	77
1945	1,411	57
1946	1,028	41
1947	441	19
1948	190	7
1949	102	1
1950	62	1
1951	53	1

The Diphtheria Immunisation Campaign has undoubtedly played a large part in the great decrease in the number of cases.



### Vaccination Against Small pox.

All vaccinations are carried out privately. The following is a summary of Vaccinations during the year :—

#### Primary :

0	—	1 years	=	28
1	—	2 years	=	1
2	—	4 years	=	4
4	—	14 years	=	4
15+	—	years	=	3 42
				—

#### Re-vaccination :

15+	—	years	=	3 3
				— —
Total				45 (138)
				—



## Part 2

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# ENVIRONMENTAL HYGIENE AND SANITATION

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### MILK SUPPLIES

#### Sampling.

The milk sampling scheme at consumer level was continued during the year. Samples were forwarded to the Public Health Laboratory, Carmarthen, for testing and reports. The Methylene Blue Reduction Test is the routine test applied.

The following is a summary of the sampling results during the year :—

Satisfactory	=	19 samples
Doubtful	=	3 samples
Unsatisfactory	=	Nil samples
Total		22 samples

The following Table shows the results of milk sampling since commencement in 1948 :—

Year	Tot. Samples	%Satisfac.	%Doubtful	%Unsatisfac.
1948	131	65.6	11.4	23.0
1949	124	59.0	20.0	21.0
1950	81	75.3	12.4	12.3
1951	34	82.3	14.3	2.9
1952	22	86.3	13.7	Nil

The results justify the usefulness of the Milk Sampling Scheme. I recommend that scheme to be continued, and an endeavour made to increase the total number of samples.

#### General.

The following is a summary of the Milk Distributors in the Borough :—

Ungraded	=	4
T.T. Designated	=	4
T.T. Pasteurised	+	1
Total		9

There were no new Distributors registered during the year, and none resigned or were struck off the register.

Number of Inspections of Dairies, Vans, etc.	=	18
Number of Intimation Notices	=	1
Number of Formal Notices	=	1

### Control of Milk.

There are so many Departments, with their appropriate officers, concerned in the control of milk from the cow to the consumer, that the question of liason between all concerned is a difficult one. The following are the main Departments and Officers concerned :—

A. District Councils	—	1. Medical Officer of Health. 2. Sanitary Officer. 3. Public Health Laboratory.
B. County Council	--	1. Medical Officer of Health. 2. Food and Drugs Inspector. 3. Police.
C. County Agricultural Committee (Milk Sub-Committee)	--	1. County Milk Regulation Officer. 2. County Milk Production Officer. 3. Dairy Advisory Staff.
D. National Milk Advisory Service (Ministry of Agriculture and Fisheries)	—	1. Milk Testing Officer. 2. Laboratory Staff.
E. Animal Health Division (Ministry of Agriculture and Fisheries)	—	1. Divisional Veterinary Officer. 2. Laboratory Staff.

Informal meetings have been arranged between the various officers to ensure the maximum amount of co-operation.

## WATER SUPPLIES

### Sampling.

The water supply scheme at consumer level was continued during the year. Samples were forwarded to the Public Health Laboratory at Carmarthen for testing and report.

The results of sampling were as follows :—

Satisfactory	=	18 samples
Doubtful	=	4 samples
Unsatisfactory	=	1 sample
		—
Total		23 samples

In addition bacteriological (6) and chemical (2) sampling were carried out at the Crowhill Well (one of the sources of Water supply) and were found to be satisfactory.

## **WATER SUPPLY SOURCES**

### **Crowhill Well Supplies.**

The source of this supply is a shallow well situated at Crowhill, approximately one mile north of the Borough, and on the western bank of the Cleddau river.

It is not clear whether the well is filled from the neighbouring river, or from a Spring, or both. The level of the well fluctuates considerably, in proportion to the rainfall and the volume of water in the river.

The well was first used as a public water supply in the year 1889, and was implemented by the Prescelly Supply in 1933.

The well can supply an average of approximately 180,000 gallons per day, and the water is pumped to Service Reservoirs at Portfield and City Road.

### **Prescelly Gathering Grounds.**

The Prescelly gathering grounds are situated in the North-East area of the county, approximately 10 miles from the Borough. The water from the Prescelly hills is stored in an Impounding reservoir. The gathering grounds and the Impounding reservoir were formerly the property of the Milford Haven U.D.C. but now belongs to the Prescelly Joint Water Board, of which the Borough is a member. The daily allocation of water to the Borough from this source is 300,000 gallons. It is hoped that when additional mains are laid, and other work carried out, that the allocation to the Borough will be stepped up considerably.

Prescelly water is a typical upland surface water, reasonably free from contamination. It is filtered and chlorinated in special plant for this purpose immediately after leaving the Impounding Reservoir. There is a danger here that chlorination is effected at too great a distance from the Borough.

### **Storage of Water.**

There are two Reservoirs in the Borough situated respectively in the Haven and Cemetery Lane. The total capacity of these reservoirs is 345,000 gallons. This amounts to just over one day's supply and must be considered inadequate.

### **General Statistics.**

No. of new water connections during year	=	112
No. of renewals of old connections	=	50
Average daily water consumption	=	324,300 gallons
Average per head of population	=	46 gallons

## **FOOD CONTROL**

### **Registered Premises (Food and Drugs Act).**

The following is a summary of the Registered Premises in the Boorugh :—

Prepared Food Premises	=	27
Ice-Cream	=	44
Slaughter Houses	=	1
Knacker's Yards	=	Nil
No. of Inspections of above Premises	=	110

No. of Intimation Notices	=	Nil
No. of Statutory Notices	=	Nil
No. of Court Cases	=	Nil

### Food Stuffs Condemned.

The following is a summary of the Food-Stuffs condemned during the year :—

#### Tinned and Preserved Food.

Fruits	=	469 tins
Vegetables	=	141 tins
Meat	=	110 tins
Milk	=	60 tins
Ham	=	17 tins
Fish	=	14 tins
Jam	=	4 tins

#### Fresh and Prepared Food.

Sausages	=	374 lbs.
Faggots	=	360 lbs.
Minced Beef	=	120 lbs.
Kippers	=	70 lbs.
Cheese	=	62½ lbs.
Prawns	=	26½ lbs.
Flour	=	34 lbs.
Cream Filling	=	20 lbs.
Bacon	=	16 lbs.
Macaroni	=	18 lbs.
Tea	=	3 lbs.
Eggs	=	3 doz

### Ice-Cream.

Sampling. The scheme for the general bacteriological examination of Ice-Cream was continued during the year. Samples were forwarded to the Public Health Laboratory for testing and reports. The Methylene Blue Reduction Test is the routine test applied.

The results of sampling are as follows :—

Grade I	(Highly Satisfactory)	=	23	samples
Grade II	(Satisfactory)	=	3	samples
Grade III	(Doubtful)	=	1	sample
Grade IV	(Unsatisfactory)	=	2	samples
			<hr/>	
Total		=	29	samples

The following Table shows the results of sampling since the commencement of the scheme :—

Year	Tot. Samples	%Satisfac.	%Doubtful	%Unsatisfac.
1949	13	23.0	15.3	61.7
1950	27	74.0	14.8	11.2
1951	23	86.9	—	13.1
1952	29	89.6	3.5	6.9

## General.

The following is a summary of Ice-Cream Producers and Retailers in the Borough :—

Producers only	=	Nil	(0)
Producer-Retailers	=	4	(4)
Retailers only	=	40	(33)

This shows an increase of seven retailers over 1951. In addition two temporary registrations for special functions were allowed during the year.

Inspections, etc., of Ice-Cream Premises are included under the heading "Registered Premises." It was not found necessary to serve any notices during the year.

## Mineral Waters.

Actual samples of Mineral products, and a series of bottle-rinsings from the Mineral Water Factory in the Borough were forwarded to the Public Health Laboratory for general bacteriological examination.

Bottle rinsings have an undesirably high bacteriological count, and the Factory is being kept under continuous review.

There were previously two Mineral Water Factories in the Borough, but the one in Quay Street stopped production during the year.

## Bakeries and Bakehouses.

There are 11 of these premises in the Borough. One formal notice for unclean premises and insufficient sanitary accommodation was served during the year.

## Cafes, Hotels and Restaurants.

There are 19 premises in this category in the Borough. Generally they are satisfactory from a hygiene point of view.

## Public Houses.

Following an intensive survey of these premises by the Sanitary Department, in conjunction with the Licensing Magistrates, adequate supplies of hot water for glass washing, and adequate sanitary accommodation have now, generally, been obtained.

## Food Poisoning.

Nil to report.

## Meat Inspection.

During the year the Borough Sanitary Officer has continued to be responsible for the Ante-mortem and Post-mortem inspection of animals and carcasses at the Slaughter House. This Slaughter House serves a large area of Western Pembrokeshire.

The following table shows the number of animals slaughtered during the year :—

Sheep	=	10,928
Calves	=	2,690
Steers and Heifers	=	1,796
Pigs	=	1,796
Cows	=	795



Bulls	=	54
Private Pigs	=	50

Total	=	18,109	(17,074)
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The following Table shows the number of whole carcasses condemned and the reasons for condemnation :—

DISEASE or CONDITION	Cows	Bulls	Steers	Heifers	Calves	Sheep	Pigs	Total (1952)	Total (1951)
Tuberculosis .....	20	1	2	1			8	32	45
Congenital TB. ....					1			1	
Emaciation .....	29	2	3	2		40	4	80	100
Swine Erysipelas .....							3	3	1
Septic Arthritis .....							6	6	
Septicaemia .....		1				6		7	8
Pericarditis .....		1					1	2	4
Septic Metritis .....	4			3				7	2
Septic Mastitis .....	14							14	
Moribund .....				1		10	2	13	4
Blackleg .....			1					1	
Red-water .....			2					2	1
Uraemia .....		1						1	2
Pyresia ....	10		1	1		3		15	4
Hydraemia .....						4		4	2
John's Disease .....				1				1	
Pyelo-nephritis .....	3							3	5
Immaturity .....					45			45	56
Enteritis .....									2
Oedema .....	1							1	3
Multiple Growths .....						4		4	1
Arthritis .....									1
Gangrene .....						5		5	2
Imperfect Bleeding .....						1		1	3
Multiple Abscesses .....									3
Stiff Limb Disease .....									1
Ragweed Poisoning .....									2
Joint Ill .....					9			9	8
Pyæmia .....					3			3	
Decomposing .....	3					4		7	
Anaemia .....	2							2	
Pneumonia .....	1							1	
Totals .....	87	6	9	9	58	77	24	270	261

The following Table shows the Regional condemnation and causes :—

Disease or Condition	Amnt in lbs 1952	Amnt in lbs 1951
Localised T.B.	3,454	2,719
Bruising, etc.	6,784	4,666
T.B. Offals	8,535	3,105
Other Offals	35,431	—
Totals	54,204	10,490

## Re-Actors.

The following is a summary of re-actors slaughtered during the years :—

Cows	=	121
Bulls	=	2
Steers and Heifers	=	47
Calves	=	4
		<hr/>
		174

## Cysticercus Bovis.

Thirty-three cows were found to be infected with Cysticercus Bovis during the year.

## HOUSING

### Council Housing Programme and Estates.

#### New Houses.

No. of New Council Houses completed during 1952 = 106

No. of New Council Houses in course of erection at  
31st December, 1952 = 134

The following Table shows the number of new Council Houses completed annually over the past six years :—

1947	.....	13
1948	.....	29
1949	.....	42
1950	.....	36
1951	.....	47
1952	.....	106
		<hr/>
		273

#### Borough Estates.

The following is a summary of the various Housing Estates in the Borough :—

	Estate	Perm. Houses	Pre-fabs	Huts	Requisition
	Cardigan Road		—	7	—
	Coronation Avenue	67	—	—	—
	Cromie Avenue	36	—	—	—
	Cromie Terrace	8	—	—	—
	Fenton Villas	18	—	—	—
	Fishguard Road	—	—	20	—
*	Jury Lane	49	—	—	—
*	Mount Airy	94	—	—	—
*	Priory Estate	94	—	—	—
	Portfield Avenue	48	—	—	—
	Scotchwells View	15	50	—	—
	Scolton Villas	26	—	—	—
	Stepney Terrace	14	—	—	—
	Winch Lane	30	—	—	—
	<hr/>				
	Totals	499	50	27	Nil



## Re-Housing.

Ninety-six families were re-housed in permanent houses, and five families in Pre-fabricated bungalows during the year.

Seven families were re-housed from Site 2 (Cardigan Road Hutments) during the year. As each family is re-housed from this Site the vacated hutments are being rendered uninhabitable. It is hoped, in this way, to eventually clear the site. There are still seven families left in Site 2.

Eight families were re-housed from Site 4 (Fishguard Road) to permanent houses during the year. However, five families entered Site 4 from Site 2 and hence Site 4 Family Units have only reduced by three during the year. It is not anticipated that Site 4 can be cleared for some considerable time. However, the living conditions and amenities on this Site are reasonable. There are still 20 families living on Site 4.

In the absence of an up-to-date survey it is impossible to give accurate figures for re-housing required due to over-crowding and Category 4 and 5 dwellings.

At present there are 245 official applications for re-housing.

## Private Building.

Six houses were completed during the year by private enterprise. Five further houses were in the course of construction at 31st December, 1952.

## General Statistics.

No. of Housing Inspections	=	296
No. of Intimation Notices	=	56
No. of Statutory Notices	=	29
Notices to enter and execute work	=	4
No. of Time and Place Notices	=	16
No. of Demolition Orders made	=	2
No. of Demolition Orders carried out	=	Nil
No. of Demolition Orders outstanding at 31st Dec., 1952	=	13
No. of undertakings given to close for human habitation	=	3

## General Observations on Housing.

The beneficial effects of good housing are both short term and long term. The short term effect is the pleasure and consequent increase of morale given by modern amenities and conveniences. The long term effect of good housing may be summarised as follows:—

1. Consequent upon the increase in morale, there should be an eventual increase of general productivity. This is an important factor in the present economic state of the country.
2. Increased bodily and physical well-being, particularly in regard to Infectious Diseases, e.g. Tuberculosis, where adequate living space, a high standard of hygiene and good ventilation and heating are essential factors in the elimination of this disease.
3. **Increased Mental Well-being.** There is little doubt that the conditions prevailing in the war years and the post-war period, e.g. young married couples in rooms, or living with in-laws, resulted.

in many cases, in emotional conflict, such emotional conflict, is often reflected in the mental instability of children reared under these conditions. Thus this matter has some bearing on the problem of juvenile delinquency and educationally sub-normal children.

Due to the continued decline in Birth-Rate, and the increased expectation of life, the community is gradually inclining towards the older age-groups. Thus future housing programmes will be required, more and more, to cater for elderly people.

A very successful start,, in this direction, has been made in the Borough, by the erection of 12 Old Person's Bungalows.

There is a tendency in Urban areas to develop large new Housing estates on the outskirts of the town, with subsequent neglect of the town centres. If such neglect proceeds too far, then insanitary conditions are bound to arise. It is important, therefore, both from a general sanitary point of view, and from an amenity point of view, that derelict areas in the heart of the Borough should be cleared. This is to be followed by either re-building or provision of pleasant open spaces.

### **Conclusion.**

The Council has faced up to, and largely met, the Post-war Housing problem. There is still, however, a hard core of housing problems, clearance areas and provision of old people's houses. Also it must be remembered that young people continue to follow the traditional marriage ceremony, with subsequent demands for "a home of their own." It is important for their physical and mental health, and that of their children, that they should have "a home of their own."

## **GENERAL HYGIENE AND SANITATION**

### **Refuse Disposal.**

Collection of Refuse takes place three times weekly by covered Refuse Vehicles. The Refuse is disposed of by tipping on the Frolic Tip.

The Tip is unsightly, and has given rise to some degree of nuisance to neighbouring premises. There is no danger to Public Health, however, providing it is properly controlled regarding rodent infestation. Eventually the Tip should provide a pleasant piece of recreational ground. As the time for this is within sight, the Council should consider the future policy for Disposal of Refuse.

The receptacles used by house-holders for storage of Refuse are still, in many cases, unsatisfactory. Both in the interest of domestic hygiene, and Public Health, it is necessary that such containers should be durable (preferably metal), water and air tight.

### **Sewage Disposal.**

The disposal of crude sewage into the River Cleddau, as it passes through the Borough, is most undesirable. Whilst it is true that no outbreak of disease, in recent years, can be attributed to the sewage outfall, the position in this respect is rather akin to an unex-

ploded bomb. There is a great potential danger, the present state of affairs is also most prejudicial to the development of the natural beauty and amenities of the Borough.

I strongly advise the Council to initiate plans for (a) removal of sewage outfall considerably down stream of the Borough, (b) partial treatment of sewage before final disposal.

### **Public Conveniences.**

With the provision of the proposed convenience in Quay Street, the Borough should be adequately provided in this respect.

A facility which would be of great advantage to tourists and visitors, would be the erection of a few signs showing the location of Public Conveniences.

### **Rodent Control.**

The following is a summary of Rodent Control during the year :—

	No. of Surveys	No. of Treatments	Estimated Kill
Business Premises	28	12	104
Private Houses	57	20	90
Council Property	60	46	509
Refuse Tips	7	6	460
Sewers	—	—	—

There was a considerable decrease in the amount of Rodent Control during the year following upon the resignation of the Rodent Officer. This control is most important from a Public Health point of view, and I hope the re-organised Sanitary Department will give it serious consideration.

### **General Nuisances.**

Four (4) notices had to be served on occupants of dirty houses. One Council tenant had to be evicted for keeping the house in a filthy and verminous condition.

Approximately 1% of premises in the Borough are served with Cess-Pits for drainage purposes. Some of these Cess-Pits overflowed giving rise to a nuisance.

Unauthorised Caravan dwellers gave rise to trouble during the the year. There are two authorised Caravans in the Borough. Twenty-eight defective drains were reported and dealt with during the year.

### **Disinfection and Disinfestation.**

Six premises were dealt with for disinfection and disinfestation during the year.

### **Mortuaries.**

There is one mortuary in the Borough, situated in St. Thomas Green. This Mortuary is used and controlled jointly by the Borough and the Haverfordwest Rural District Council. It is well equipped, and can be considered reasonably satisfactory from every point of view.

## **Pets Act—1951.**

One shop was licensed during the year, and visits made to ensure that the provisions of the Act were being complied with.

## **Sanitation in Public Halls and Cinemas.**

There has been considerable improvement in sanitation and hygiene in Public Houses. There is still room for improvement in Halls and other Public premises.

## **Street Cleaning.**

Carried out by the Surveyor's Department.

**Salvage.**

**Smoke Abatement.**

**Public Baths and Washbasins.**

**Common Lodging Houses.**

**Exhumation.**

**Burial of Vagrant Dead.**

**Removal of Persons to Institutions.**

**Offensive Trades.**

Nil to Report.

## **Factories and Workshops.**

There are 84 premises in the Borough registered under the Factories Act.

One hundred and seventy-six inspections of these premises were carried out during the year. The chief defects found were general lack of cleanliness and inadequate sanitation.

Informal action was taken in most cases of defects, but two written notices required to be served. No cases were taken to court.

There are seven outworkers in the Borough concerned in the making of clothes and one in the upholstery trade. The notification to the Council of lists of out-workers is still very low.



# APPENDICES

## NEW ORDERS AND REGULATIONS COMING INTO FORCE DURING 1952

Official Publications — Short Title	Date of Operation
1. Food Standards. (Fish) Paste. Amendment) Order 1951	7th March, 1952.
2. Food Standard. (Meat Paste) Order, 1951	7th March, 1952.
3. Parrots (Prohibition of Import)	8th January, 1952.
4. Public Health (Tuberculosis) 1952	1st May, 1952.
5. Ice Cream (Heat Treatment)	6th May, 1952.
6. Condemnation of Imported Canned Meat	Circ. No. MF/3/52.
7. Food Standards (Ice Cream) Amendment Order 1952	7th July, 1952.
8. Defence Sale of Food Regulations 2. Public Health (Aircraft) Regulations 1952	1st October, 1952.
9. Public Health Act, 1936. Public Health Ships Regulations, 1952.	1st October, 1952.
10. Public Health Act, 1936, Section 143. Public Health (Meat) Amendment, Regu- lations 1952	—
11. Food and Drugs Act, 1938. Milk and Dairies Regulations.	Cir. No. MF/5/52.
12. Public Health (Imported Food) Regula- tions.	Circ. No. MF/7/52.
13. Public Health (Meat) Amendment, Regu- lations 1952.	Circ. No. MF/8/52.
14. Rivers (Prevention of Pollution) Act, 1951	Circ. No. 58/52.
15. Public Health (Aircraft) Regulations, 1952	Circ. No. 24/52.
16. Public Health (Ships) Regulations, 1952.	Circ. No. 25/52.
17. Public Health (Ships) Regulations, 1952.	Circ. No. 31/52.
18. Rodent Control. Treatment of Sewers.	Circ. No. PDP/1952/4
19. Rodent Control. Manufacture of Warfarin.	Circ. No. PDP/1952/5
20. Food Standards (Coffee Mixture) Order 1952.	21st September, 1952
21. Mineral Oil in Food (Amendment) Order 1952.	19th October, 1952.
22. Housing (Improvement) Grants. Exes. Regulations, 1952.	1st November, 1952.

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|--|----------------------|
| 23. Milk (Special Designation) Specified Area) Order 1952.                         | 1st November, 1952.  |
| 24. Public Health (Imported Food) Regulations. (Republic of Turkey).               | Offcl Cert. MF/11/52 |
| 25. Milk and Dairies Regulations 1949. Approved oxidising and preservative agents. | MF/12/52.            |
| 26. Mineral Oil in Food. (Amendment) Order 1952.                                   | MF/13/52.            |
| 27. Infectious Disease in Aircraft. Tracing of Contacts.                           | No. 28/52.           |

### VISIT OF MASS RADIOGRAPHY SERVICE SEPTEMBER AND OCTOBER, 1952

The following is a statistical summary of attendances, etc., at the Mass Miniature Radiography Unit at the Haverfordwest Centre.

	M	F	Total 1952	Total 1951	Total 1949
Total examined	986	956	1,942	1,118	734

It will be seen therefore, that the attendances for extmination has risen considerably at each successive visit of the unit.

Of the 1,942 persons examined, 125 showed some abnormality, i.e. approximately 6%. The majority of these abnormalities were of a minor nature, not requiring any special attention. Seven (7) persons required further examination and investigation in regard to Tuberculosis. Other abnormalities detected included Heart Disease, Bronchitis, abnormalities of bone structure of thorax, abnormalities of the Diaphrgam and Fibrosis.





